

TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION  
DIVISION OF SUPERFUND  
**DRYCLEANER ENVIRONMENTAL RESPONSE PROGRAM (DCERP)**



**DRYCLEANER APPROVED CONTRACTOR (DCAC) APPLICATION**

**Directions:** Type or print, using blue or black ink to complete this form. Incomplete or illegible forms will not be accepted. Retain a copy of this form and all attachments for your records. All attachments to this application shall be typewritten. If you have any questions concerning completing this application, contact DCERP at (615) 532-0900. Submit the completed application with the appropriate application fee to:

TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION  
DIVISION OF SUPERFUND - DCERP  
401 CHURCH STREET, 4TH FLOOR L & C ANNEX  
NASHVILLE, TN 37243-1538

**SECTION 1. APPLICANT INFORMATION**

Company or Organization Name \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact Person \_\_\_\_\_ Telephone # (\_\_\_\_) \_\_\_\_\_

Alternate Contact Person \_\_\_\_\_ Fax # (optional) (\_\_\_\_) \_\_\_\_\_

**Single-Office or Multiple-Office Applications**

In accordance with Rule 1200-1-17-.09(2)(b), a company with more than one office location may either submit one combined DCAC application for all office locations under a single application fee or submit a separate DCAC application for each office location. Should one office location be disqualified under this program at any time, any other offices included in a multiple-office DCAC application package would also be disqualified.

How many office locations are included in this application? \_\_\_\_\_

Provide the street address for each office location included in this application. Also provide the desired contact names and telephone numbers for each office location. This data will be used in preparing the DCAC published list(s).

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**SECTION 2. CONTRACTOR CATEGORIES**

**DCAC** A company may apply for approval to perform work in any or all of the four DCAC categories listed below:

**Category 1** Companies approved to perform facility inspections.

**Category 2** Companies approved to perform investigative work (includes Prioritization Investigation, Solvent Impact Assessment, Remedial Alternatives Study, and periodic monitoring and sampling).

**Category 3** Companies approved to perform remediation oversight (includes remedial design (Remedial Alternatives Study) and oversight of remediation activities including start-up, periodic system evaluation, maintenance, sampling, and reporting).

**Category 4** Companies approved to perform remediation work (includes construction of remedial systems per approved plans). In accordance with Rule 1200-1-17-.09(2)(a)1(iv), remediation companies must have a valid Tennessee Contractor's License with a Specialty Classification of **D (Hazardous Waste Removal)** or **E (Air, Water or Soil Remediation)**. Provide a copy of the Contractor's License with Specialty Class documentation with this application if you are applying in this category.

**Check all DCAC categories for which the company is seeking approval with this application:**

\_\_\_\_\_ **Category 1**      \_\_\_\_\_ **Category 2**      \_\_\_\_\_ **Category 3**      \_\_\_\_\_ **Category 4**

### SECTION 3. APPLICATION FEES

A non-refundable application fee of \$500.00 shall be submitted with this application if the company is applying to be in one DCAC category. A non-refundable application fee of \$750.00 shall be submitted with this application if the company is applying to be in more than one DCAC category. **Make checks payable to: Treasurer, State of Tennessee.**

### SECTION 4. DCAC EXPERIENCE REQUIREMENTS

**Carefully review and follow the experience documentation requirements outlined in Rule 1200-1-17-.09(2).**

Attach this material in a labeled and organized format; the submittal will include:

- Statement of company organization, experience, and personnel (years in business, location of offices, form of business, list of officers and principals of the company, detailed organizational chart with employee names, titles, resumes and locations, etc. )
- Company's latest audited financial statement or other alternate proof of financial stability
- Documentation of relevant experience for each category of work and letters of recommendation
- Description of any professional license revocation or suspension proceedings and/or penalty assessments for violation of environmental laws

**This list is not intended to be all inclusive. Consult Rule 1200-1-17 Section .09 for a complete list of DCAC requirements.**

### SECTION 5. INSURANCE AND OTHER PROGRAM REQUIREMENTS

**Read Rule 1200-1-17-.09(3)(k) for a complete description of DCERP insurance requirements.**

A DCAC shall maintain liability insurance coverage of the types and with the minimum amounts described. The DCAC shall provide certification, with the Division of Superfund listed as a certificate holder, to the Department of such coverage during the initial application process and yearly with the renewal application. The General Liability and Pollution Insurance policies shall have the Department of Environment and Conservation and the State of Tennessee named as an additional insured on the contractor's policies and these policies shall have endorsements for a waiver of subrogation between the contractor and the state.

In accordance with Rule 1200-1-17-.09(2)(a)1(iii), provide with this application documentation stating the required insurance is in effect or provide a letter from an insurance company stating such insurance will be in effect within thirty (30) days from the date of written notice from the Department which states the company is approved for the DCAC list.

The DCERP Reimbursement Application (For Approved Costs) form requires that DCACs sign several certification statements, which are in addition to the certification statements found in Section 6 of this form. A complete list of these additional certification statements can be found in Section 6 of the Reimbursement Application form (CN-1125 Rev. 1-98).

### SECTION 6. CERTIFICATION STATEMENTS

In accordance with Rule 1200-1-17-.09(2)(a)2, the application shall include a **notarized statement, sworn by an executive officer or principal** of the company which includes the following provisions:

I certify to the best of my knowledge and belief:

- neither the company nor any of the company's officers, principals, and employees have been convicted of, pled guilty to, or pled nolo contendere to violating any of the laws stated in Rule 1200-1-17-.09(2)(a)2 or comparable laws in another jurisdiction;
- the company understands that reimbursement from the Fund will be in accordance with the reasonable rate schedule as established by the Department; and,
- the company and its personnel have the licenses and registrations required by the State of Tennessee to perform the activities said company proposes to perform.

In accordance with Rule 1200-1-17-.09(8), I further certify under penalty of law, including but not limited to penalties for perjury, the information contained in this application and on any attachments, is true, accurate and complete to the best of my knowledge, information, and belief. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment for intentional violations.

Printed Name \_\_\_\_\_

Official Title \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

State of \_\_\_\_\_

County of \_\_\_\_\_

Before me personally appeared \_\_\_\_\_ whose signature appears above. Witness my hand and official

seal, this \_\_\_\_ day of \_\_\_\_\_ (month), 19 \_\_\_\_.

Notary Public \_\_\_\_\_

My commission expires \_\_\_\_\_